

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge) (37 CFR 1.16 (e)) required)	Attorney Docket Number	PR60715USw	
	First Named Inventor	David Harold DREWRY	
	<i>COMPLETE IF KNOWN</i>		
	Application Number		
	Filing Date		
	Art Unit		
	Examiner Name		

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

CHEMICAL COMPOUNDS

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (**28 January 2005**) as United States Application Number or PCT International

Application Number **PCT/US2005/003478** and was amended on (MM/DD/YYYY) *(if applicable)*.

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I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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(first and middle [if any])Family Name
Or Surname**David, Harold****DREWRY**Inventor's
Signature
x

Date

x **6/8/06**

Residence: City

State

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Citizenship

Durham**NC****US****US**

Mailing Address

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Inventor's Signature		Date	
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Or Surname**DREWRY**Inventor's
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X

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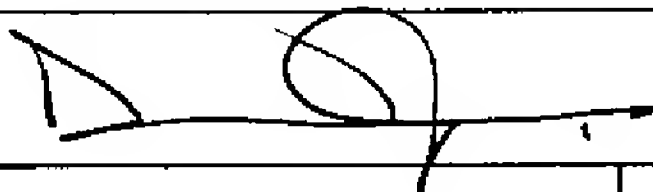
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Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	ZIP	Country

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge) (37 CFR 1.16 (e)) required)	Attorney Docket Number	PR60715USw	
	First Named Inventor	David Harold DREWRY	
	COMPLETE IF KNOWN		
	Application Number		
	Filing Date		
	Art Unit		
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CHEMICAL COMPOUNDS

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

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Application Number **PCT/US2005/003478** and was amended on (MM/DD/YYYY) (if applicable).

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Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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David, Harold**DREWRY**Inventor's
Signature

x

Date

Residence: City

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Durham**NC****US****US**

Mailing Address

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Given Name

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Robert, Neil, III**HUNTER**Inventor's
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Inventor's Signature		Date	
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James, Andrew		LINN	
Inventor's Signature <i>James Andrew Linn</i>		Date <i>6-28-06</i>	
Residence: City Durham	State NC	Country US	Citizenship US
Mailing Address c/o GlaxoSmithKline, Five Moore Drive, PO Box 13398			
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Signature
x

Date

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DECLARATION		ADDITIONAL INVENTOR(S) Supplemental Sheet Page 4 of 4	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Robert, A.		STAVENGER	
Inventor's Signature 		Date 6/24/06	
Residence: City King of Prussia	State PA	Country US	Citizenship US
Mailing Address c/o GlaxoSmithKline, Corporate Intellectual Property Department, Five Moore Drive, PO Box 13398,			
City Research Triangle Park	State NC	ZIP 27709	Country US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address c/o GlaxoSmithKline, Corporate Intellectual Property Dept., Five Moore Drive, PO Box 13398			
City	State	ZIP	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	ZIP	Country

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.